

## PART B—ISSUE FEE TRANSMITTAL

Complete and mail this form, together with applicable fees, to: Box ISSUE FEE  
**AUG 25 2000**  
 Assistant Commissioner for Patents  
 Washington, D.C. 20231

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

LM02/0717

THERESE A HENDRICKS  
 C/O WOLF GREENFIELD & SACKS P.C.  
 FEDERAL RESERVE PLAZA  
 600 ATLANTIC AVENUE  
 BOSTON MA 02210-2211

Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

**Certificate of Mailing**

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/387,317	08/31/99	035	SAM, P	2732 07/17/00
First Named Applicant	DOBBINS,	35 USC 154 (b) term ext.	=	0 Days.

**TITLE OF INVENTION** METHOD FOR ESTABLISHING RESTRICTED BROADCAST GROUPS IN A SWITCHED NETWORK

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
2 C0441/7150-(	370-392.000	P33	UTILITY	NO	\$1210.00	10/17/00

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" Indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 WOLF, GREENFIELD

2 & SACKS, P.C.

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Cabletron Systems, Inc.

(B) RESIDENCE: (CITY & STATE OR COUNTRY)

Rochester, New Hampshire

Please check the appropriate assignee category indicated below (will not be printed on the patent)

individual  corporation or other private group entity  government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

Issue Fee

Advance Order - # of Copies \_\_\_\_\_

4b. The following fees or deficiency in these fees should be charged to:

DEPOSIT ACCOUNT NUMBER 23/2825

(ENCLOSE AN EXTRA COPY OF THIS FORM)

Issue Fee

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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

Paula Sulin

(Date)

August 25, 2000

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

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TRANSMIT THIS FORM WITH FEE

MF-7



8-28-00

B/1

Express Mail Label No.: EL310245902US  
Date of Deposit: August 25, 2000  
ATTORNEY'S DOCKET NO.: C0441/7150

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Dobbins, et al.  
Serial No: 09/387,317  
Filed: August 31, 1999  
For: METHOD FOR ESTABLISHING RESTRICTED BROADCAST GROUPS IN A SWITCHED NETWORK

Examiner: Sam, P.  
Art Unit: 2732  
Batch No.: P33  
Date of Allowance: July 17, 2000

**BOX ISSUE FEE**

Commissioner For Patents  
Washington, D.C. 20231

Sir:

Transmitted herewith is the following document:

Part B - Issue Fee Transmittal  
 Return Receipt Postcard

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617)720-3500, Boston, Massachusetts.

A check in the amount of \$1,210.00 is enclosed to cover the Issue Fee. If the fee is insufficient, the balance may be charged to Deposit Account 23/2825. A duplicate of this sheet is enclosed.

Respectfully submitted,  
*Dobbins, et al., Applicant*



Paul D. Sorkin, Reg. No. 39,039  
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Attorneys of Record

Docket No. C0441/7150  
Dated: August 25, 2000  
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